24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Vote!	
	C C00473918
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
NGP Van Inc	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 48 Grove St	08 26 2016 Amount
Ste 202	
City State Zip Code	855.55
Somerville MA 02144-2500	Transaction ID: VN7A7A2JPX7 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: K House District: 00
Lisa Blunt Rochester Oppose	President Senate State: DE
Calendar Year-To-Date Per Election for Office Sought Disbu 2016	rsement For: ✓ Primary General Other (specify) ✓
Full Name of Payee The Pivot Group, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1720 St NW	08 20 2010
Ste 550	Amount
City State Zip Code	18842.66
Washington DC 20006-3741	Transaction ID: VN7A7A2JPP2 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Lisa Blunt Rochester Oppose	President Senate State: DE
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: ✓ Primary General Other (specify) ✓
(a) SUBTOTAL of Itemized Independent Expenditures	19698.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	19698.21
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Caroline Fines [Electronically Filed] Date	8 26 2016
Oignature	